

**MARICOPA COUNTY ENVIRONMENTAL SERVICES DEPARTMENT**

AIR QUALITY DIVISION

1001 North Central Avenue

Phoenix, Arizona 85004

(602) 506-6094 FAX (602) 506-6985 OR 6179 Web Site: www.maricopa.gov/sbeap**APPLICATION FOR A PERMIT TRANSFER***(As required by A.R.S. §49-483 and Maricopa County Air Pollution Control Regulations, Rule 200, Section 404)***INSTRUCTIONS**

Use this form to transfer a current air quality permit from one person to another. Submit the completed application, along with appropriate permit transfer fee, to the Maricopa County Department of Environmental Services (MCDES) at least 30 days before the proposed transfer. The fee is \$250.00 for a Title V permit transfer or \$200.00 for a Non-Title V permit transfer. Respond to each of the following items. Attach additional documents where required.

1. EXISTING PERMIT NUMBER _____	EXPIRATION DATE _____																
2. EXISTING BUSINESS NAME: _____ AND ADDRESS OF SITE IN _____ (STREET) _____ MARICOPA COUNTY _____ (CITY) _____ AZ ZIP CODE _____																	
3. CURRENT PERMIT HOLDER: NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____ TELEPHONE NUMBER: () _____ CONTACT (OPTIONAL): _____																	
4. Person to receive permit (provide the legal name of corporation, partnership or other entity, as applicable): NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____ TELEPHONE NUMBER: () _____ CONTACT (OPTIONAL): _____																	
5. NEW BUSINESS NAME: _____ (IF DIFFERENT FROM THE EXISTING BUSINESS NAME) _____																	
6. Provide a complete description of the equipment to be transferred. Attach additional sheets if necessary. Or check <input type="checkbox"/> if identical to the equipment listed under the current permit. <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="text-align: left; width: 25%;"><u>EQUIPMENT</u></th><th style="text-align: left; width: 25%;"><u>MAKE & MODEL</u></th><th style="text-align: left; width: 25%;"><u>HOW MANY</u></th><th style="text-align: left; width: 25%;"><u>COMMENTS</u></th></tr></thead><tbody><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr></tbody></table>		<u>EQUIPMENT</u>	<u>MAKE & MODEL</u>	<u>HOW MANY</u>	<u>COMMENTS</u>	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____														
7. In addition to the Permit Transfer fee, submit other fees that will be due and payable before the effective date of transfer. Questions about fees call 602-506-6464.																	
8. Attach a summary of the qualifications of each person principally responsible for the operation of the source.																	
9. Attach a statement by the chief financial officer of the New Permittee that it is financially capable of operating the source in compliance with the law. Include all relevant information that provides the basis for the statement.																	
10. Attach a brief description of any action for the enforcement of any federal or state law, rule or regulation, or any county, city or local government ordinance relating to the protection of the environment, instituted against any person employed by the New Permittee and principally responsible for operating the source during the five years preceding the date of application. In lieu of this description, the New Permittee may submit a copy of the certificate of disclosure or 10-K form required under A.R.S 49-109, or a statement that this information has been filed in compliance with A.R.S 49-109. If there had been no such actions against the New Permittee, a statement to that effect, signed by a responsible official of the new owner should be provided.																	

CERTIFICATION BY THE CURRENT PERMIT HOLDER (TRANSFEROR):

(EFFECTIVE DATE)

I intend to transfer the responsibility, coverage and liability of this permit to the named transferee on _____.

I certify that the information provided in this application and accompanying documents is true, correct and complete to the best of my knowledge.

SIGNATURE OF OWNER OR RESPONSIBLE OFFICIAL OF BUSINESS _____ DATE _____

TYPE OR PRINT NAME AND TITLE _____

PERMANENT ADDRESS _____

TELEPHONE NUMBER _____

CERTIFICATION BY THE NEW PERMIT HOLDER (TRANSFeree):

Upon approval of this permit transfer, I will accept full responsibility for the coverage and liability of the permit. I certify that the information provided in this application and accompanying documents is true, correct and complete to the best of my knowledge.

SIGNATURE OF NEW OWNER OR RESPONSIBLE OFFICIAL OF BUSINESS _____ DATE _____

TYPE OR PRINT NAME AND TITLE _____

FOR MCESD USE ONLY:

☐ Business Services ☐ Permit Section, Completeness Determination

REVIEWED BY _____ DATE _____ BY _____ DATE _____

REVIEWED BY

DATE

☐ APPROVED ☐ DENIED

REASON FOR DENIAL:

